C-2 Rev. 7/97



## CAMPAIGN FINANCIAL DISCLOSURE REPORT

SUMMARY PAGE (Please Print or Type)

Section I					2001. 11	
Name of Candidate or Political Co.					Office Sought (if candida	District (if env)
Mike	Vacarrato	1 41			Senate Home Phone	Work Phone
Mailing Address	☐ Check if address char	-	and Zip Lewistor	1 83501	746-1545	A#4
	21h Ave		LEWIS JOY	1 0330	776-1574	E CH 104HO"
Name of Political Treasurer	Ohrtman					
Mailing Address	☐ Check if address cha	inge. City	and Zip		Home Phone	Work Phone
510 Burre	-11.Dr	14	wiston	835d	743 0319	748-3151
Section II		TV	PE OF RE	PORT		
Directions: To indicate the	type of report being	filed, fill in	the approp	riate dates a	nd check the appropria	te box(es). See the
This repor	t is for the period fro	om <u>05</u>	<u> </u>	_ <i>04</i> thr	ough <u>06 / /7</u>	107
☐ 7 Day Pre-Primar	v Report	□ 7 Day	Pre-Genera	l Report	☐ Quarterly (April 3	0)
□ / Day Fie-Fillian	y Report	•			(only filed by ballot	measure committees)
Ø30 Day Post-Prim	ary Report	☐ 30 Day	y Post-Gene	eral Report	☐ Quarterly (July 30	n
,	amoral Danort	☐ Annua	l Report			measure committees)
☐ October 10 Pre-G	eneral Report	Aima	пкероп		, •	
Is this Report as	n amendment?	Yes XN	О	Is this a	Termination Report?	☐ Yes ⊠ No
C d III	STATEMENT	OF NO CO	ONTRIBU	TIONS OR	EXPENDITURES	
Section III						
Directions: If you had no co	ontributions or exper	nditures dui	ring this rep	orting perio	d, check the box next to Dat	o the statement below, fill in
the appropriate dates and sig	gn this report. Be sur	re to carry	forward the	арргорпасе	Calcildal Teal to Dat	e figures in Column 11,
Section IV.	that I have received	no contribu	utions and h	ave made no	expenditures during t	his reporting period
Thereby sering	from <u>05</u> /	10 1 0	24throi	ugh <u>06</u>	1 17 1 04.	
Section IV			SUMMA	······································		
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## **DETAILED SUMMARY PAGE**

Name of Candidate or Comm	Macarratu	From <u>05   16   64 to 06   17   64</u>
		ONTRIBUTIONS s (\$50.00) or Less This Period
	Total — 6 —	Total — O — Amount \$
		EXPENDITURES y-Five Dollars (\$25.00) This Period
	Total _ O _	Total Amount \$C

	Total This Period
Number of Schedule A pages Attached	
Contributions	
Unitemized Contributions (\$50 and less) from top of page	\$ -0-
Itemized Contributions (total all Schedule A sheets)	s - 0 -
Total Contributions (also enter this figure on page 1, Section IV, line 3)	s — o —
Number of Schedule B pages Attached	
Expenditures	
Unitemized Expenditures (less than \$25) from top of page	s - o -
Itemized Expenditures (total all Schedule B sheets)	\$ - 0 -
Total Expenditures (also enter this figure on page 1, Section IV, line 5)	8 - 0 -